



**KNOLLWOOD ENERGY**

REC 16-130  
Knollwood Energy of MA LLC  
P.O. Box 30  
Chester, New Jersey 07930

NHPUC 14JAN16AM11:18

January 12, 2016

Debra A. Howland  
Executive Director  
New Hampshire Public Utilities Commission  
21 South Fruit Street, Suite 10  
Concord, NH 03301-2429

Dear Ms Howland,

Enclosed please find applications for 12 systems to be part of the Knollwood Energy of MA LLC (NH-II-13-089) Class II Photovoltaic aggregation for New Hampshire Renewable Energy Certificates (RECs) generated from customer-sited sources, pursuant to New Hampshire Code of Administrative Rules Puc 2506.

Also enclosed are the Simplified Process Interconnection Application and Service Agreement, and the Certificate of Completion.

Electronic versions have been entered into the new online application system under batch number KN16003.

Jeff Egan	George Heavner
John Elkins	Susan Hemingway
Matt Erlick	Bobby Lambert – High St Solar
Albert Franz	Jeff Huckins
Justin Hart	John Straight
Bradford Hartwell	Stephen Rust

Please feel free to contact me with any questions or further instructions.  
Thank you for your consideration,

Linda Modica  
New England REC Operations Manager  
**Knollwood Energy of MA LLC**  
973.879.7826  
[linda@knollwoodenergy.com](mailto:linda@knollwoodenergy.com)

## NH Public Utilities Commission

REC Aggregator Portal

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New Users [CLICK HERE](#) to setup your account for this form. Creating an account enables you to partially complete the form and return later to finish it or to make changes after the form is submitted. Be sure to create your account **BEFORE** entering information into the form, or the information will be lost.

Existing Users [CLICK HERE](#)

Basic Information

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Who is submitting this request?

Aggregator

Aggregator Batch Number

KN16003

Executive Director email

PUC - Executive.Director

Aggregator name

Knollwood Energy

Aggregator Email

linda@knollwoodenergy.com

Other Aggregator name

Other aggregator email address

Facility Owner Name

George Heavner

Facility Owner email

g.heavner@verizon.net

Owner Phone

603-377-7079

Facility Address

29 Briemann Drive

Facility Town/City

Merrimack

Facility State

NH

Facility Zip

03054

Is the facility address the same as the owner's mailing address

- ☒ Yes  
☐ No

Mailing Address

Mailing Town/City

Mailing State

Mailing Zip

Primary Contact (who should we call with questions)

Linda Modica

Contact Phone

Other Email Address

Facility Information

Class

II

Utility

PSNH

Other Utility Name

To obtain a GIS ID contact:

James Webb

408 517 2174

jwebb@apx.com

GIS ID (include "NON")

Date of Initial Operation

Facility Operator Name, if applicable

Panel Quantity

Panel Make

Panel Model

Panel Rated Output

System capacity based on panels

Inverter Quantity

Inverter Make

Inverter Rated Output

Add'l Inverter Quantity

NA

Additional Inverter Make

None

Add'l Inverter Model

Rated Output - Primary Inverter

250

Rated Output - Additional Inverter

System capacity based on single inverter make

0.09

System capacity based on two inverter types

System capacity in mW as stated on the interconnection agreement

9.0

Revenue Grade Meter Make

AEE Solar

Was this facility installed directly by the customer (no electrician involved)?

☐ Yes

☒ No

Electrician Name & Number

Shawn Marvel13363M

Other Electrician Name & Number

Installation Company

SunRay Solar

Other Installation Company Name

Other Inst. Company Address

Other Inst. Company City

Other Inst. Company State

Other Inst. Company Zip

Independent Monitor Name & Company

Paul Button - Energy Audits Unlimited

Other Monitor Name and Company

Is the installer also the equipment supplier?

- ☒ Yes  
☐ No

Equipment Vendor

Please attach your completed interconnection agreement including Exhibit B.

[https://fs30.formsite.com/jan1947/files/f-5-99-5864499\\_mZxN6Aqb\\_Heavner\\_SPIA.pdf](https://fs30.formsite.com/jan1947/files/f-5-99-5864499_mZxN6Aqb_Heavner_SPIA.pdf)

The project described in this application will meet the metering requirements of PUC 2506 including:

Electricity generation in megawatt hours shall be reported to the GIS quarterly with a statement that the submission is accurate by the owner of the source, the independent monitor or a designated representative.

A revenue quality meter is used to measure the electricity generated.

The facility owner has certified to the independent monitor that the meter operates according to manufacturing standards.

The meter shall be maintained according to the manufacturer's recommendations.

The project is installed and operating in conformance with applicable building codes.

A copy of the facility's interconnection agreement is attached.

Please attach additional document here

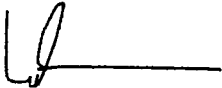
[https://fs30.formsite.com/jan1947/files/f-5-168-5864499\\_eZqxSUOm\\_Heavner\\_Exhibit\\_B.pdf](https://fs30.formsite.com/jan1947/files/f-5-168-5864499_eZqxSUOm_Heavner_Exhibit_B.pdf)

Please attach additional document here

[https://fs30.formsite.com/jan1947/files/f-5-173-5864499\\_qA2NLHWr\\_Heavner\\_NHOS.pdf](https://fs30.formsite.com/jan1947/files/f-5-173-5864499_qA2NLHWr_Heavner_NHOS.pdf)

Aggregator statement of accuracy

Sign your name using a mouse or, if you are using a touch-screen device, a stylus or other pointer.



Print Name

Linda Modica

Date Signed

01/12/2016

PUBLIC SERVICE COMPANY OF NEW HAMPSHIRE  
INTERCONNECTION STANDARDS FOR INVERTERS  
SIZED UP TO 100 KVA  
**Simplified Process Interconnection Application and Service Agreement**

RECEIVED  
JUL 10 2014  
SESD

PSNH Application Project ID#: N3050

**Contact Information:**

Legal Name and Address of Interconnecting Customer (or, Company name, if appropriate)

Customer or Company Name (print): George Heavner

Contact Person, if Company: \_\_\_\_\_

Mailing Address: 29 Briann Dr. ✓

City: Merrimack

State: NH

Zip Code: 03054

Telephone (Daytime): 603.377.7079

(Evening): \_\_\_\_\_

Facsimile Number: \_\_\_\_\_

E-Mail Address: g.heavner@verizon.net

**Alternative Contact Information** (e.g., System installation contractor or coordinating company, if appropriate):

Name: SunRay Solar LLC

Mailing Address: 249 Loudon Rd.

City: Concord

State: NH

Zip Code: 03301

Telephone (Daytime): 603.225.6001

(Evening): \_\_\_\_\_

Facsimile Number: \_\_\_\_\_

E-Mail Address: Bob@Spreadthesunshine.com

**Electrical Contractor Contact Information** (if appropriate):

Name: Shawn Marvel

Mailing Address: 108 Sunapee St. #C

City: Newport

State: NH

Zip Code: 03773

Telephone (Daytime): 603.209.4364

(Evening): \_\_\_\_\_

Facsimile Number: \_\_\_\_\_

E-Mail Address: marvel@inbx.com

**Facility Site Information:**

Facility (Site) Address: Same as above

City: \_\_\_\_\_

State: NH

Zip Code: \_\_\_\_\_

Electric

Service Company: PSNH

Account Number: 56847076049 ✓

Meter Number: 568453675 ✓

Account and Meter Number: Please consult an actual PSNH electric bill and enter the correct Account Number and Meter Number on this application. If the facility is to be installed in a new location, please provide the PSNH Work Request number.

PSNH Work Request # \_\_\_\_\_

**Non-Default\* Service Customers Only:**

Competitive Electric

Energy Supply Company: \_\_\_\_\_

Account Number: \_\_\_\_\_

(Customer's with a Competitive Energy Supply Company should verify the Terms & Conditions of their contract with their Energy Supply Company.)



PUBLIC SERVICE COMPANY OF NEW HAMPSHIRE  
INTERCONNECTION STANDARDS FOR INVERTERS  
SIZED UP TO 100 KVA

**Simplified Process Interconnection Application and Service Agreement**

**Facility Machine Information:**

Generator/ Inverter Manufacturer: EnPhase ✓ Model Name & Number: M250 ✓ Quantity: 36  
Nameplate Rating: 250 (kW) (kVA) (AC Volts) Phase: Single ☒ Three ☐

Nameplate Rating: *The AC Nameplate rating of the individual inverter.*

System Design Capacity: 9.54 (kW) (kVA) Battery Backup: Yes ☐ No ☒

System Design Capacity: *The system total of the inverter AC ratings. If there are multiple inverters installed in the system, this is the sum of the AC nameplate ratings of all inverters.*

✓ Net Metering: If Renewably Fueled, will the account be Net Metered? Yes ☒ No ☐

✓ Prime Mover: Photovoltaic ☒ Reciprocating Engine ☐ Fuel Cell ☐ Turbine ☐ Other ☐

✓ Energy Source: Solar ☒ Wind ☐ Hydro ☐ Diesel ☐ Natural Gas ☐ Fuel Oil ☐ Other ☐

**Inverter-based Generating Facilities:**

UL 1741 / IEEE 1547.1 Compliant (Refer To Part Puc 906 Compliance Path For Inverter Units, Part Puc 906.01 Inverter Requirements)

✓ Yes ☒ No ☐

The standard UL 1741.1 dated May, 2007 or later, "Inverters, Converters, and Controllers for Use With Independent Power Systems," addresses the electrical interconnection design of various forms of generating equipment. Many manufacturers choose to submit their equipment to a Nationally Recognized Testing Laboratory (NRTL) that verifies compliance with UL 1741.1. This term "Listed" is then marked on the equipment and supporting documentation. *Please include, any documentation provided by the inverter manufacturer describing the inverter's UL 1741/IEEE 1547.1 listing.*

**External Manual Disconnect Switch:**

An External Manual Disconnect Switch shall be installed in accordance with 'Part Puc 905 Technical Requirements For Interconnections For Facilities, Puc 905.01 Requirements For Disconnect Switches and 905.02 Disconnect Switch.'

✓ Yes ☒ No ☐

Location of External Manual Disconnect Switch: Next to meter ✓

Project Estimated Install Date: 7/14/14

Project Estimated In-Service Date: 7/18/14

**Interconnecting Customer Signature:**

I hereby certify that, to the best of my knowledge, all of the information provided in this application is true and I agree to the **Terms and Conditions for Simplified Process Interconnections** attached hereto:

Customer Signature: [Signature] Title: \_\_\_\_\_ Date: July 8, 2014

**Please include a one-line and/or three-line diagram of proposed installation. Diagram must indicate the generator connection point in relation to the customer service panel and the PSNH meter socket. Applications without such a diagram may be returned.**

**For PSNH Use Only**

Approval to Install Facility:

Installation of the Facility is approved contingent upon the Terms and Conditions For Simplified Process Interconnections of this Agreement, and agreement to any system modifications, if required.

Are system modifications required? Yes ☐ No ☒ To be Determined ☐

Company Signature: [Signature] Title: SE ENGINEER Date: 7.15.14

Public Service Company Of New Hampshire  
Interconnection Standards For Inverters Sized Up To 100 kVA  
Exhibit B - Certificate of Completion for Simplified Process Interconnections

RECEIVED  
AUG 13 2014  
SESD

**Installation Information:** ☐ Check if owner-installed

Customer or Company Name (print): George Heavner  
Contact Person, if Company: \_\_\_\_\_  
Mailing Address: 29 Briann Dr  
City: Merrimack State: NH Zip Code: 03054  
Telephone (Daytime): (603) 377-7079 (Evening): \_\_\_\_\_  
Facsimile Number: \_\_\_\_\_ E-Mail Address: g.heavner@verizon.net

**Facility Information:**

Address of Facility (if different from above): \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Electrical Contractor Contact Information:**

Electrical Contractor's Name (if appropriate): Shawn Marvel  
Mailing Address: 108 Sunapee St #C  
City: Newport State: NH Zip Code: 03773  
Telephone (Daytime): (603) 209-4364 (Evening): \_\_\_\_\_  
Facsimile Number: \_\_\_\_\_ E-Mail Address: marvel@inbx.com  
License number: 13363 M

Date of approval to install Facility granted by the Company: \_\_\_\_\_

PSNH Application ID number: #N 3050

**Inspection:**

The system has been installed and inspected in compliance with the local Building/Electrical Code of:

City: Merrimack County: Hillsborough

Signed (Local Electrical Wiring Inspector, or attach signed electrical inspection):

Signature: [Signature]

Name (printed): Fred T. Kelley Date: 8/8/14

**Customer Certification:**

I hereby certify that, to the best of my knowledge, all information contained in this Exhibit B - Certification of Completion is true and correct. This system has been installed and shall be operated in compliance with applicable standards. Also, the initial start-up test required by Puc. 905.04 has been successfully completed.

Customer Signature: [Signature]

As a condition of interconnection you are required to send/fax a copy of this form to :

Public Service Company of New Hampshire  
Supplemental Energy Sources Department  
780 North Commercial Street  
P. O. Box 330, Manchester, NH 03105-0330  
Fax No.: (603) 634-2449

## New Hampshire PUC REC Certification Application Owner Statements

The information provided on this application for New Hampshire Renewable Energy Certificate eligibility is accurate to the best of my knowledge and I authorize Knollwood Energy to act on my behalf in filing said application.

The project described in this application will meet the metering requirements of PUC 2506 including:

Electricity generation in megawatt hours shall be reported to the GIS quarterly with a statement that the submission is accurate by the owner of the source, the independent monitor, or a designated representative.

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The meter shall be maintained according to the manufacturer's recommendations.

The project is installed and operating in conformance with applicable building codes.

A copy of the facility's interconnection agreement is attached.

George A. Heavner

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Printed Name of signature owner

George A. Heavner  
George A. Heavner (Nov 12, 2015)

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Signature of system owner